Fill in this information to identify your case:				
United States Bankruptcy Court for the: DISTRICT OF NEVADA				
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13			

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Y	our full name		
g	Write the name that is on your government-issued picture	GAVIN First Name	First Name
У	dentification (for example, our driver's license or passport).	H. Middle Name	Middle Name
۲	σαδορύτη.	BLACK	
	Bring your picture dentification to your meeting	Last Name	Last Name
V	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. <i>J</i>	All other names you		
_	nave used in the last 8 /ears	First Name	First Name
	nclude your married or	Middle Name	Middle Name
n	maiden names.	Last Name	Last Name
3. (Only the last 4 digits of		
	our Social Security	xxx - xx - <u>3</u> <u>8</u> <u>8</u> <u>6</u>	xxx - xx
	number or federal ndividual Taxpayer	OR	OR
I	dentification number	9xx - xx -	9xx - xx -

(ITIN)

Del	otor 1	GAVIN H. BLACK			Cas	e number (if known)	
			About Debto	or 1:		About Debtor 2 (S	pouse Only in a Joint Case):
4.	and En	usiness names nployer	✓ I have n	not used any business names or E	EINs.	☐ I have not use	ed any business names or EINs.
	(EIN) y	cation Numbers ou have used in t 8 years	Business name	9		Business name	_
	Include	trade names and	Business name	3		Business name	
	doing b	ousiness as names	Business name	3		Business name	
					_		
			<u></u>		_	<u></u>	
5.	Where	you live					t a different address:
			2318 VALE			Number Street	
			SPARKS	NV 89434			
			City	State ZIP Code		City	State ZIP Code
			WASHOE County		_	County	
			the one above	ng address is different from ve, fill it in here. Note that the id any notices to you at this ess.		from yours, fill it in	ng address is different n here. Note that the court es to you at this mailing
			Number Stre	eet	_	Number Street	
			P.O. Box			P.O. Box	
			City	State ZIP Code	_	City	State ZIP Code
6.		ou are choosing	Check one:			Check one:	
	bankru		petition,	e last 180 days before filing this , I have lived in this district longer any other district.	·		180 days before filing this e lived in this district longer her district.
				another reason. Explain. B U.S.C. § 1408.)		I have another (See 28 U.S.C	r reason. Explain. C. § 1408.)
P	art 2:	Tell the Court Ab	oout Your Ba	nkruptcy Case			
7.		apter of the uptcy Code you		For a brief description of each, see (Form 2010)). Also, go to the top			S.C. § 342(b) for Individuals Filing appropriate box.
	are cho under	posing to file	Chapter 7	7			
			Chapter 1	11			
			Chapter 1	2			
			☐ Chapter 1	13			

Deb	otor 1 GAVIN H. BLACK		Case number (if known	own)		
8.	How you will pay the fee	court for more details abo pay with cash, cashier's c	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.			
			nstallments. If you choose this option, ng Fee in Installments (Official Form 10	=		
		By law, a judge may, but i than 150% of the official p fee in installments). If you	waived (You may request this option of some not required to, waive your fee, and moverty line that applies to your family so choose this option, you must fill out that I Form 103B) and file it with your petition.	nay do so only if your income is less ize and you are unable to pay the le Application to Have the Chapter 7		
9.	Have you filed for	☑ No				
	bankruptcy within the last 8 years?	Yes.				
		District	When	Case number		
		District	MM / DD /	YYYY		
		District	when MM / DD / `	Case number		
		District	When	Case number		
40	Are one honder meet	□ No	MM / DD /	YYYY		
10.	Are any bankruptcy cases pending or being	□ No				
	filed by a spouse who is not filing this case with	✓ Yes.				
	you, or by a business	Debtor ANN L. LIBBY	Rela	tionship to you WIFE		
	partner, or by an affiliate?	District NEVADA (RENO)		114 Case number, 14-51057 if known		
		Debtor	Rela	ationship to you		
		District	When	Case number,		
			MIMI / UU /	TTTT II KNOWN		
11.	Do you rent your residence?	✓ No. Go to line 12.✓ Yes. Has your landlord of	obtained an eviction judgment against y	vou?		
		□ No. Go to line □ Yes. Fill out li	, , ,			

Debtor 1 GAVIN H. BLACK			Case number (if known)						
Pa	art 3:	Report About An	y Bı	ısine	sses You Own as a	Sole Proprietor			
12. Are you a sole proprietor of any full- or part-time business?		ull- or part-time	✓ No. Go to Part 4.✓ Yes. Name and location of business						
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or				Name of business, if any Number Street				
	sole pro	ave more than one prietorship, use a e sheet and attach it			City Check the appropriate	box to describe your bu	State siness:	ZIP Co	de
	to this petition.				Single Asset Rea Stockbroker (as d	ness (as defined in 11 U I Estate (as defined in 1 defined in 11 U.S.C. § 10 er (as defined in 11 U.S.C e	1 U.S.C. § 101(51B 01(53A)))))	
		r 11 of the ptcy Code and a <i>small busin</i> ess	can mos	set ap st recei	propriate deadlines. If ynt balance sheet, statem	the court must know who you indicate that you are lent of operations, cash- ot exist, follow the proced	a small business d	lebtor, you d federal in	must attach your come tax return
	debtor?	$\overline{\checkmark}$	No.	I am not filing under Cl	napter 11.				
	For a definition of small business debtor, see			No.	I am filing under Chapt the Bankruptcy Code.	er 11, but I am NOT a si	mall business debto	or accordin	g to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chapt Bankruptcy Code.	er 11 and I am a small b	ousiness debtor acc	cording to the	he definition in the	
Pa	art 4:	Report If You Ov	vn o	Hav	e Any Hazardous F	Property or Any Pro	operty That Ne	eds Imm	ediate Attention
14.	propert alleged immine	own or have any y that poses or is to pose a threat of nt and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?				If immediate attention i	is needed, why is it need	ded?		
	perishal livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property?	Number Street			
						City		State	ZIP Code

Debtor 1 **GAVIN H. BLACK** Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case. you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:				
☐ Incapacity.	I have a mental illness or a mental deficiency that makes me			

incapable of realizing or making rational decisions about finances.

My physical disability causes me □ Disability. to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

 □ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

ПI	am not required	to receive	a briefing	about
	redit counselina			

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me □ Disability. to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1	GAVIN H. BLACK				Case number (if	know	n)
Р	art 6:	Answer These Q	uesti	ons for Reporting Pu	ırpos	ses		
16.	What k have?	ind of debts do you	16a.		-	sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b.	,	-	iness debts? Business debt ment or through the operation		debts that you incurred to obtain e business or investment.
			16c.	State the type of debts yo	ou ow	e that are not consumer or bus	siness	s debts.
17.	Are yo	u filing under er 7?		No. I am not filing under	· Chap	oter 7. Go to line 18.		
	any exclud admini are pai availab	estimate that after empt property is ed and strative expenses d that funds will be ble for distribution ecured creditors?	\square		•	•	-	xempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do timate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you te your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you te your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

Debtor 1	GAVIN H. BLACK		Case number (if known)			
Part 7:	Sign Below					
For you		I have examined this petition, and I declarand correct.	re under penalty of perjury that the information provided is true			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
			pay or agree to pay someone who is not an attorney to help me I read the notice required by 11 U.S.C. § 342(b).			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		•	oncealing property, or obtaining money or property by fraud in sult in fines up to \$250,000, or imprisonment for up to 20 years, and 3571.			
		X /s/ GAVIN H. BLACK	X			
		GAVIN H. BLACK, Debtor 1	Signature of Debtor 2			
		Executed on 07/12/2019	Executed on			
		MM / DD / YYYY	MM / DD / YYYY			

Debtor 1	GAVIN H. BLACK			Case number (if knowr	n)	
represente	not represented by ey, you do not need	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.				
		X /s/ Sean P. Patterse Signature of Attorney	<u> </u>	Date	07/12/2019 MM / DD / YYYY	
		Sean P. Patterson,	Esq.			
		Printed name				
		Sean Patterson., E	sq.			
		232 Court Street Number Street				
		_				
		Reno		NV	89501	
		City		State	ZIP Code	
		Contact phone (775)	786-1615	Email address Illegal	pat@aol.com	
		5736				
		Bar number		State	_	

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA RENO DIVISION

In	n re GAVIN H. BLACK	Case No.	
		Chapter	7
	DISCLOSURE OF COMPENSATION OF A	TTORNEY FOR	DEBTOR
1.	 Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I that compensation paid to me within one year before the filing of the petiti services rendered or to be rendered on behalf of the debtor(s) in contemp is as follows: 	on in bankruptcy, or	agreed to be paid to me, for
	For legal services, I have agreed to accept		\$850.00
	Prior to the filing of this statement I have received		\$500.00
	Balance Due		\$350.00
2.	2. The source of the compensation paid to me was: ☐ Other (specify)		
3.	3. The source of compensation to be paid to me is:		
	✓ Debtor ☐ Other (specify)		
4.	 I have not agreed to share the above-disclosed compensation with a associates of my law firm. 	ny other person unle	ss they are members and
	☐ I have agreed to share the above-disclosed compensation with anoth associates of my law firm. A copy of the agreement, together with a I compensation, is attached.	•	
5.	5. In return for the above-disclosed fee, I have agreed to render legal service	e for all aspects of th	e bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the bankruptcy;	debtor in determinin	g whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs a	and plan which may b	pe required;
	c. Representation of the debtor at the meeting of creditors and confirmati	ion hearing, and any	adjourned hearings thereof;

$D \cap C \cap $	/ E = ====	20201	(12/15)
ロノいいい	(FOIII)	ZU.5U11	11//15

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/12/2019 /s/ Sean P. Patterson, Esq.

Date Sean P. Patterson, Esq. Sean Patterson., Esq.

232 Court Street Reno, Nv. 89501

Phone: (775) 786-1615 / Fax: (775) 322-7288

Bar No. 5736

/s/ GAVIN H. BLACK

GAVIN H. BLACK

Fill in this inf	Fill in this information to identify your case:					
Debtor 1	GAVIN First Name	H. Middle Name	BLACK Last Name			
Debtor 2 (Spouse, if filing)		Middle Name	Last Name			
United States Bankruptcy Court for the: DISTRICT OF NEVADA						
Case number (if known)					Check if this is a amended filing	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Summarize Your Assets Part 1: Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$39,726.00 1b. Copy line 62, Total personal property, from Schedule A/B..... \$39,726.00 1c. Copy line 63, Total of all property on Schedule A/B..... Part 2: **Summarize Your Liabilities** Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$31,052.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$9,000.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$40,100.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$80,152.00 Your total liabilities Part 3: **Summarize Your Income and Expenses** Schedule I: Your Income (Official Form 106I)

Schedule J: Your Expenses (Official Form 106J)

Copy your combined monthly income from line 12 of Schedule I.....

Copy your monthly expenses from line 22c of Schedule J.....

\$5,875.98

\$6,823.00

Debtor 1		GAVIN H. BLACK Case number (if known)				
F	art 4:	Answer These Questions for Administrative	e and Statistical Records			
6.	Are yo	u filing for bankruptcy under Chapters 7, 11, or 13?				
	□ No ✓ Ye	 You have nothing to report on this part of the form. Checks 	ck this box and submit this form to the court with yo	our other schedules.		
7.	What k	ind of debt do you have?				
	ك	our debts are primarily consumer debts. Consumer debt mily, or household purpose." 11 U.S.C. § 101(8). Fill out lii		•		
		our debts are not primarily consumer debts. You have not sometime to the court with your other schedules.	othing to report on this part of the form. Check thi	s box and submit		
8.		ne Statement of Your Current Monthly Income: Copy you Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form	•	\$10,038.43		
۵	Conv. tl	no following enocial entogories of claims from Bart 4. li	oo 6 of Schodula E/E:			

Total claim

From Part 4 on Schedule E/F, copy the following:				
9a. Domestic support obligations. (Copy line 6a.)	\$0.00			
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$9,000.00			
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00			
9d. Student loans. (Copy line 6f.)	\$8,800.00			
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00			
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00			
9g. Total. Add lines 9a through 9f.	\$17,800.00			

Fill in this info	ormation to ide	ntify your	case and this	filing:		
Debtor 1	GAVIN	Н.	BLAC	:K		
Debior 1	First Name	Middle Nar				
Debtor 2 (Spouse, if filing)	First Name	Middle Nar	ne Last Na	me		
(epouse,g)						
United States Ban	kruptcy Court for th	e: DISTRIC	T OF NEVADA			
Case number (if known)						if this is an ed filing
Official Form	106A/B					
Schedule A/						12/15
the asset in the car filing together, bot sheet to this form.	tegory where you h are equally resp On the top of any	think it fits I onsible for additional	pest. Be as comp supplying correct pages, write your	lete and accurate as information. If more name and case numb	et fits in more than one cat possible. If two married pe space is needed, attach a per (if known). Answer eve tate You Own or Have	ople are separate ry question.
✓ No. Go to	, ,	r equitable i	nterest in any res	idence, building, land	I, or similar property?	
				ries from Part 1, incli nber here	uding any	\$0.00
Part 2: Des	scribe Your Vel	icles				
you own that some		ou lease a v	ehicle, also report	it on Schedule G: Exec	registered or not? Include cutory Contracts and Unexpire	•
□ No ☑ Yes	2010, 1. 201010, opc	Tuning vo.		J		
3.1. Make:	TOYOTA		no has an interest eck one.	in the property?	Do not deduct secured clai amount of any secured clai	ms on Schedule D:
Model:	RAV4		-		Creditors Who Have Claim	
Year:	2019		Debtor 2 only	stor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate mileag	je: 1,200	— □	Debtor 1 and Deb At least one of the	e debtors and another	\$17,952.00	\$17,952.00
Other information:					Ψ11,002.00	<u> </u>
2019 TOYOTA Ramiles)	AV4 (approx. 1,2	00 ☑	Check if this is of (see instructions)	community property		
3.2. Make:	MINI		no has an interest eck one.	in the property?	Do not deduct secured clai amount of any secured clai	ms on Schedule D:
Model:	COOPER		•		Creditors Who Have Claim	
Year:	2010	_	Debtor 2 only Debtor 1 and Debtor 1	otor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate mileag	ge: 78,000			e debtors and another	\$5,500.00	\$5,500.00
Other information:		_ <u>\</u>			Ψο,οσοίου	Ψο,σσο.σσ
2010 MINI COOP miles)	ER (approx. 78,0	000	Check if this is of (see instructions)	community property		

Debt	or 1	GAVIN H	I. BLACK		Case number (if known)	
Othe 201 1,80 THE THIS	el: roximate r informa 7 TRIUI 10 miles E DEBT S MOTO	mileage: ation: MPH STR s) OR WAS ORCYCLI RICE. raft, aircra	EET CLUB (approx. TRYING TO SELL E. THIS IS HIS ft, motor homes, ATVs	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this is community proper (see instructions)	vehicles, and accessories	ms on Schedule D:
5.	Yes		lue of the portion you c	own for all of your entries from Part 2, i	ncluding any	\$20.4F2.00
		•		Part 2. Write that number here	→	\$30,452.00
	nrt 3: ou own			and Household Items terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Example No	es: Majora	s and furnishings appliances, furniture, line THE DEBTOR H.	ens, china, kitchenware AS USED FURNITURE AND HOUSE	HOLD GOODS.	\$3,500.00
7.	□ No	es: Televis music	collections; electronic de	video, stereo, and digital equipment; com evices including cell phones, cameras, me		1
0	_		See continuation	n page(s).		\$1,350.00
8.	Example No		es and figurines; painting , coin, or baseball card c	gs, prints, or other artwork; books, picture: ollections; other collections, memorabilia,	•]
9.	Example	es: Sports		, and other hobby equipment; bicycles, po tools; musical instruments	ool tables, golf clubs, skis;	
	✓ No ☐ Yes	s. Describe	9]
10.	□ No	es: Pistols		nition, and related equipment AS HIS GREAT GRANDFATHER'S F	REMINGTON .22 SINGLE SH	OT \$100.00

Deb	otor 1 GAVIN H. BLACK	Case number (if known)	
11.	, , ,	ther coats, designer wear, shoes, accessories	
	No ✓ Yes. Describe THE DEBTO	R HAS USED CLOTHING.	\$400.00
12.	gold, silver	jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	No ✓ Yes. Describe THE DEBTO	R HAS JEWELRY.	\$300.00
13.	Non-farm animals Examples: Dogs, cats, birds, horses		-
	✓ No ☐ Yes. Describe		
14.	Any other personal and household i	tems you did not already list, including any health aids you	
	☑ No		
			1
	information		
45		strice from Devt 2 including any entrice for negree you have	J
15.		er here	\$5,650.00
Pa	art 4: Describe Your Finance	ial Assets	
Doy	you own or have any legal or equitab	le interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you have in your way petition	allet, in your home, in a safe deposit box, and on hand when you file your	
	□ No ☑ Yes		\$27.00
17.		er financial accounts; certificates of deposit; shares in credit unions, her similar institutions. If you have multiple accounts with the same	
	☐ No ☑ Yes	Institution name:	
	17.1. Checking account:	Checking account (BANK OF AMERICA)	\$1,410.00
	17.2. Checking account:	Checking account (BANK OF AMERICA)	\$150.00
	17.3. Savings account:	Savings account (BANK OF AMERICA)	\$27.00
	17.4. Other financial account:	UNEMPLOYMENT account (BANK OF AMERICA)	\$100.00

Deb	tor 1 GAVIN H. BLACI	Case number (if known)	
18.	Bonds, mutual funds, or p Examples: Bond funds, inv	sublicly traded stocks estment accounts with brokerage firms, money market accounts	
	✓ No ☐ Yes	Institution or issuer name:	
19.	Non-publicly traded stock an interest in an LLC, part	and interests in incorporated and unincorporated businesses, including	
	✓ No Yes. Give specific information about them	Name of entity: % of ownership:	
20.	Government and corporate Negotiable instruments included	e bonds and other negotiable and non-negotiable instruments ude personal checks, cashiers' checks, promissory notes, and money orders. are those you cannot transfer to someone by signing or delivering them.	
	✓ No Yes. Give specific information about them	Issuer name:	
21.	Retirement or pension acc Examples: Interests in IRA, profit-sharing pla	, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or	
	No ✓ Yes. List each account separately.	Гуре of account: Institution name:	
	4	101(k) or similar plan: 401(k) (FIDELITY)	\$1,210.00
22.		payments posits you have made so that you may continue service or use from a company h landlords, prepaid rent, public utilities (electric, gas, water), telecommunications	
	☐ Yes	Institution name or individual:	
	_	osit on rental unit: Security deposit on rental unit	\$700.00
22		a specific periodic payment of money to you, either for life or for a number of years)	
23.	☑ No	Issuer name and description:	
24.	_	RA, in an account in a qualified ABLE program, or under a qualified state tuition program.	
	✓ No Yes	Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)
25.		interests in property (other than anything listed in line 1), and rights or	
	powers exercisable for yo	ur benefit	
	NoYes. Give specific information about them		
26.		marks, trade secrets, and other intellectual property; names, websites, proceeds from royalties and licensing agreements	
	✓ No✓ Yes. Give specific information about them		
27.		other general intangibles s, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	✓ No Yes. Give specific information about them		

Case 19-50818-btb Doc 1 Entered 07/12/19 12:50:04 Page 17 of 73 07/12/2019 12:47:54pm Debtor 1 **GAVIN H. BLACK** Case number (if known) Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you **☑** No ☐ Yes. Give specific information Federal: about them, including whether State: you already filed the returns and the tax years..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement **☑** No Yes. Give specific information Alimony: П Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else **☑** No ☐ Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance **√** No Yes. Name the insurance company of each policy and list its value..... Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died **☑** No ☐ Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue **☑** No Yes. Describe each claim...... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims **☑** No Yes. Describe each claim......

35. Any financial assets you did not already list

☑ No

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9 12:47:54pm

Deb	tor 1	GAVIN H. BLACK	Case number (if known)	
36.		dollar value of all of your entries from Part 4, including any entried for Part 4. Write that number here		\$3,624.00
Pa	art 5:	Describe Any Business-Related Property You Own or	Have an Interest In. List any	real estate in Part 1.
37.	Do you	own or have any legal or equitable interest in any business-relate	ed property?	
		Go to Part 6 Go to line 38.		
38	Accour	its receivable or commissions you already earned		Current value of the portion you own? Do not deduct secured claims or exemptions.
•••				
	✓ No	. Describe		
39.		equipment, furnishings, and supplies es: Business-related computers, software, modems, printers, copiers, desks, chairs, electronic devices	fax machines, rugs, telephones,	_
	✓ No ☐ Yes	. Describe]
40.	Machin	ery, fixtures, equipment, supplies you use in business, and tools	of your trade	
	✓ No	. Describe]
41.	Invento	ry]
	✓ No ☐ Yes	. Describe]
42.	Interes	s in partnerships or joint ventures		_
	✓ No ☐ Yes	. Describe Name of entity:	% of ownership:	
43.	Custon	er lists, mailing lists, or other compilations		
	✓ No ☐ Yes	. Do your lists include personally identifiable information (as defined by the second	ined in 11 U.S.C. § 101(41A))?]
44.	Any bu	siness-related property you did not already list		
	✓ No ☐ Yes	. Give specific information.		
45.		dollar value of all of your entries from Part 5, including any entried for Part 5. Write that number here		\$0.00

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Deb	otor 1	GAVIN H. BLACK Case number (if known)	
P	art 6:	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have ar If you own or have an interest in farmland, list it in Part 1.	n Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	ر کا	. Go to Part 7. s. Go to line 47.	
	_		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a Examp	nimals les: Livestock, poultry, farm-raised fish	
	✓ No		
	☐ Ye	5	
48.	Crops-	-either growing or harvested	
	_	s. Give specific ormation	
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of trade	
	✓ No ☐ Ye		
50.	Farm a	nd fishing supplies, chemicals, and feed	
	✓ No ☐ Ye		
51.	Any fa	rm- and commercial fishing-related property you did not already list	
	_	s. Give specific prmation	
52.		e dollar value of all of your entries from Part 6, including any entries for pages you have ed for Part 6. Write that number here →	\$0.00
P	art 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
	Do you	have other property of any kind you did not already list? les: Season tickets, country club membership	
	✓ No	s. Give specific information.	
54.	Add th	e dollar value of all of your entries from Part 7. Write that number here →	\$0.00

Debtor 1	GAVIN H. BLACK	Case nu	ımber (if known)	
Part 8:	List the Totals of Each Part of this Form			
55. Part 1	1: Total real estate, line 2		→	\$0.00
56. Part 2	2: Total vehicles, line 5	\$30,452.00		
57. Part 3	3: Total personal and household items, line 15	\$5,650.00		
58. Part 4	4: Total financial assets, line 36	\$3,624.00		
59. Part 5	5: Total business-related property, line 45	\$0.00		
60. Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7	7: Total other property not listed, line 54	+\$0.00		
62. Total	personal property. Add lines 56 through 61	\$39,726.00	Copy personal property total	+ \$39,726.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62			\$39,726.00

Debto	r 1 GAVIN H. BLACK	Case number (if known)
7. <u>E</u>	Electronics (details):	
C	THE DEBTOR HAS A CUSTOM BUILT DESKTOP COMPUTER (1 YES COMPUTER (3 YRS OLD), A MACBOOK LAPTOP COMPUTER (5 YES KINDLES (2 YRS OLD).	,,
	THE DEBTOR HAS A PLAYSTATION 4 (3 YRS OLD), AN XBOX ONE SWITCH (2 YRS OLD).	E (3 YRS OLD) & A NITENDO \$400.00

Debtor 1			case:			
	GAVIN First Name	H. Middle Name	BLACK			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	e Last Name			
	inkruptcy Court fo					Chook if this is an
Case number (if known)						Check if this is an amended filing
Official Form	106C					
Schedule C	The Prope	erty You CI	aim as Exem	ot		04/1
Using the property space is needed, f write your name ar	you listed on Sci ill out and attach nd case number (i	hedule A/B: Prop to this page as m if known).	perty (Official Form 10 nany copies of Part	6A/B) 2: Ad) as your source, list the ditional Page as nece	esponsible for supplying correct information e property that you claim as exempt. If mor ssary. On the top of any additional pages, you claim. One way of doing so
exempted up to the receive certain be exemption of 100°	ne amount of any enefits, and tax-e % of fair market	y applicable stat exempt retireme value under a la	tutory limit. Some en nt fundsmay be un aw that limits the exe	xemp limite empti	tionssuch as those ed in dollar amount. I	value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount.
Part 1: Ide	entify the Prop	perty You Cla	aim as Exempt			
1. Which set of	exemptions are	you claiming?	Check one only,	even	if your spouse is filing	with you.
كا	•		kruptcy exemptions.	11 U	.S.C. § 522(b)(3)	
☐ You are	claiming federal e	exemptions. 11 l	J.S.C. § 522(b)(2)			
2. For any prop	erty you list on	Schedule A/B th	nat you claim as exe	mpt, f	fill in the information	below.
Brief description Schedule A/B tha			Current value of the portion you own		ount of the emption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		eck only one box for th exemption	
Brief description:			\$5,500.00	$\overline{\mathbf{Q}}$	\$0.00	Nev. Rev. Stat. § 21.090(1)(f), (p)
2010 MINI COOI		8,000 miles)			100% of fair market value, up to any	
Line from <i>Schedul</i>	e A/B:				applicable statutory	
Brief description: 2017 TRIUMPH 1,800 miles) THE DERTOR W	VAS TRYING TO	O SELL THIS	\$7,000.00		\$0.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(f), (p)
MOTORCYCLE.	e A/B: 3.3					
_						
MOTORCYCLE.						
MOTORCYCLE. Line from Schedul		ad avamutian of	maya than \$470.2500	2		
MOTORCYCLE. Line from Schedul 3. Are you clair	-	-	more than \$170,350 years after that for ca		led on or after the date	of adjustment.)

Debtor 1 GAVIN H. BLACK Case num			Case number	per (if known)		
Part 2:	Additional Page					
	ption of the property and line on /B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B		eck only one box for h exemption		
HOUSEHO	otion: FOR HAS USED FURNITURE AND OLD GOODS. Chedule A/B: 6	\$3,500.00		\$3,500.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(b)	
DESKTOP LAPTOP C MACBOOK OLD), AN I YRS OLD).	OR HAS A CUSTOM BUILT COMPUTER (1 YRS OLD), A DELL COMPUTER (3 YRS OLD), A C LAPTOP COMPUTER (5 YRS PAD (4 YRS OLD) & 2 KINDLES (2			\$950.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(b)	
YRS OLD)	otion: FOR HAS A PLAYSTATION 4 (3 TOR HAS A PLAYSTATION 4 (3 TOR HAS A PLAYSTATION 4 (3 TOR HAS OLD) & A SWITCH (2 YRS OLD). Tothedule A/B:7	\$400.00		\$400.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(z)	
GRANDFA SHOT LON (1st exemp	OR HAS HIS GREAT THER'S REMINGTON .22 SINGLE	\$100.00		\$100.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(i)	
GRANDFA SHOT LON (2nd exem	OR HAS HIS GREAT THER'S REMINGTON .22 SINGLE	\$100.00		\$0.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(a)	
Brief descrip	otion:	\$400.00	<u> </u>	\$400.00 100% of fair market	Nev. Rev. Stat. § 21.090(1)(b)	
Line from So	chedule A/B: 11		_	value, up to any applicable statutory limit		
	otion: FOR HAS JEWELRY. Chedule A/B: 12	\$300.00	<u></u>	\$300.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(a)	
(1st exemp	otion: OR HAS CASH ON HAND. otion claimed for this asset) shedule A/B:16	\$27.00	<u></u>	\$20.25 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(g)	

Debtor 1 **GAVIN H. BLACK** Case number (if known) Part 2: **Additional Page** Amount of the Brief description of the property and line on Current value of Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$27.00 \$6.75 Nev. Rev. Stat. § 21.090(1)(z) \square THE DEBTOR HAS CASH ON HAND. 100% of fair market (2nd exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 16 limit Brief description: \$1,410.00 \$1,057.50 Nev. Rev. Stat. § 21.090(1)(g) \square Checking account (BANK OF AMERICA) 100% of fair market (1st exemption claimed for this asset) value, up to any Line from Schedule A/B: 17.1 applicable statutory limit Brief description: \$1,410.00 \$352.50 Nev. Rev. Stat. § 21.090(1)(z) $\overline{\mathbf{Q}}$ Checking account (BANK OF AMERICA) 100% of fair market (2nd exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 17.1 limit Brief description: \$27.00 \$20.25 Nev. Rev. Stat. § 21.090(1)(g) \square Savings account (BANK OF AMERICA) 100% of fair market (1st exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 17.3 limit Brief description: \$27.00 \$6.75 Nev. Rev. Stat. § 21.090(1)(z) $\overline{\mathbf{Q}}$ Savings account (BANK OF AMERICA) 100% of fair market (2nd exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 17.3 limit Brief description: \$150.00 \$112.50 Nev. Rev. Stat. § 21.090(1)(g) $\overline{\mathbf{Q}}$ Checking account (BANK OF AMERICA) 100% of fair market (1st exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 17.2 limit Brief description: \$150.00 \$37.50 Nev. Rev. Stat. § 21.090(1)(z) \square Checking account (BANK OF AMERICA) 100% of fair market (2nd exemption claimed for this asset) value, up to any Line from Schedule A/B: 17.2 applicable statutory limit Brief description: \$100.00 \$100.00 Nev. Rev. Stat. § 612.710 $\sqrt{}$ **UNEMPLOYMENT account (BANK OF** 100% of fair market AMERICA) value, up to any Line from Schedule A/B: 17.4 applicable statutory limit Brief description: \$1,210.00 \$1,210.00 Nev. Rev. Stat. § 21.090(1)(r) $\overline{\mathbf{Q}}$ 401(k) (FIDELITY) 100% of fair market value, up to any Line from Schedule A/B: 21 applicable statutory limit

Debtor 1 **GAVIN H. BLACK** Case number (if known) Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$700.00 \$700.00 Nev. Rev. Stat. § 21.090(1)(n) $\overline{\mathbf{A}}$ Security deposit on rental unit 100% of fair market value, up to any Line from Schedule A/B: 22 applicable statutory limit

Fill in this inf	ormation to id	entify your case				
Debtor 1	GAVIN First Name	H. Middle Name	BLACK Last Name			
Debtor 2	T ii St I Vallie	Widdle Name	Lastivamo			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for	the: DISTRICT OF	NEVADA			
Case number						
(if known)					Check if this is amended filing	
Official Form	106D					
		Who Have Cla	ims Secured k	ov Property		12/15
correct informatio	n. If more space	is needed, copy the		ogether, both are equall it out, number the entri own).		
Do any credit	ors have claims	secured by your pro	perty?			
-			•	chedules. You have noth	ning else to report on thi	is form.
Yes. Fill	in all of the inform	ation below.				
Part 1: Lis	t All Secured (Claims				
claim, list the creditor has a	creditor separately particular claim, li ible, list the claims	editor has more than of for each claim. If most the other creditors in alphabetical order	ore than one in Part 2. As	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the secures the	property that	\$7,100.00	\$7,000.00	\$100.00
FREEDOMROAD	FINANCIAL		CIAIIII. MPH STREET CLUE			
Creditor's name 10605 DOUBLE Number Street	"R" BLVD. SUIT	E 10((approx. 1,8				
		As of the dat	e you file, the claim i	s: Check all that apply.		
		Continge	nt			
RENO City	NV 89521 State ZIP Code	Unliquida	ited			
Who owes the dek		Disputed				
Debtor 1 only	or oncer one.		n. Check all that appl	•	car loan)	
Debtor 2 only		_	lien (such as tax lien,	as mortgage or secured mechanic's lien)	car ioan)	
☐ Debtor 1 and D	-	☐ Judamen	t lien from a lawsuit	,		
At least one of	the debtors and a	nother —	cluding a right to offset	t)		
Check if this of to a communit		Purchas	se Money			
Date debt was inc		Last 4 digits	of account number			
72 MONTH LOAI	N					

Add the dollar value of your entries in Column A on this page. Write that number here:

\$7,100.00

Debtor 1 GAVIN H. BLACK		Case number (if known)				
Additional Page Part 1: After listing any entries or sequentially from the prev		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any		
TOYOTA FINANCIAL SERVICES Creditor's name P.O. BOX 9786 Number Street CEDAR RAPIDS IA 52409 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and anothe Check if this claim relates to a community debt	Describe the property that secures the claim: 36 MONTH LEASE As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, musual Judgment lien from a lawsuit) Other (including a right to offset) Contract/Lease	s mortgage or secured	\$17,952.00 car loan)			
Date debt was incurred 5-19	Last 4 digits of account number					
36 MONTH LEASE 2.3 WELLS FARGO DEALER SERVICES Creditor's name P.O. BOX 130000 Number Street	Describe the property that secures the claim: – 2010 MINI COOPER (approx. 78,000 miles)	\$6,000.00	\$5,500.00	\$500.00		
RALEIGH NC 27605 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim relates to a community debt	Purchase Money	s mortgage or secured	car loan)			
Date debt was incurred 10-16	Last 4 digits of account number					
72 MONTH LO0AN						

Add the dollar value of your entries in Column A on this page. Write that number here:

\$23,952.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$31,052.00

Fill in this inf	ormation to id	dentify your c	ase:			
Debtor 1	GAVIN	H.	BLACK			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for	the: DISTRICT	OF NEVADA			
Case number (if known)					Check if this is a amended filing	an
Official Form	106E/F					
Schedule E/	F: Creditor	s Who Have	e Unsecured Claims			12/15
on Schedule A/B: Do not include an If more space is n to this page. On t	Property (Officially creditors with peeded, copy the he top of any add	al Form 106A/B) a partially secured Part you need, fi ditional pages, w	acts or unexpired leases that cou and on Schedule G: Executory Co claims that are listed in Schedule Il it out, number the entries in the rite your name and case number	ontracts and Unexpire on D: Creditors Who Ho boxes on the left. At	ed Leases (Officia old Claims Secur	l Form 106G). ed by Property.
1. Do any credit	tors have priority	unsecured clair	ns against you?			
□ No. Go t						
✓ Yes.						
claim. For ea show both pric more space is	ch claim listed, ide ority and nonpriori	entify what type of ty amounts. As m ty unsecured clair	creditor has more than one priority to claim it is. If a claim has both prior nuch as possible, list the claims in a ms, fill out the Continuation Page of	rity and nonpriority amo	ounts, list that clair	m here and or's name. If
(For an explar	nation of each type	e of claim, see the	e instructions for this form in the inst	truction booklet.		
` '				Total claim	Priority amount	Nonpriority amount
2.1				\$9,000.00	\$9,000.00	\$0.00
INTERNAL REV	ENUE SERVICE	=	Last 4 digits of account number			
Priority Creditor's Nam P.O. BOX 7346	е		•			
Number Street			When was the debt incurred?	2016	_	
			As of the date you file, the claim	is: Check all that app	ly.	
		40404	Contingent Unliquidated			
PHILADELPHIA City	PA State	19101 ZIP Code	Disputed			
Who incurred the			Type of PRIORITY unsecured cla	aim:		
Debtor 1 only			Domestic support obligations			
Debtor 2 only Debtor 1 and D	Nebtor 2 only		Taxes and certain other debts		ent	
ш	the debtors and a	another	Claims for death or personal ir intoxicated	njury while you were		
	laim is for a con		Other. Specify			
Is the claim subje		-	_ · ·			
✓ No Yes						
⊔						

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Debtor 1	GAVIN H. BLACK	Case number (if known)	
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims	
☐ No Ye 4. List all If a cree type of	es I of your nonpriority unsecured claims ditor has more than one nonpriority unseclaim it is. Do not list claims already inc	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify luded in Part 1. If more than one creditor holds a particular claim, list the other crediture cured claims, fill out the Continuation Page of Part 2.	
EL PASO City Who incurr Debtor Debtor At least Check i	### Page 14	Last 4 digits of account number 6 8 When was the debt incurred? 2013-19 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	2,400.00
SALT LAK City Who incurr Debtor Debtor At least Check i	30281 Street IE CITY UT 84130 State ZIP Code ed the debt? Check one. 1 only	Last 4 digits of account number 0 5 9 5 When was the debt incurred? 2015-19 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	3,100.00

Debtor 1 GAVIN H. BLACK	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number thei previous page.	m sequentially from the	Total claim
4.3		\$2,500.00
CAPITAL ONE BANK	Last 4 digits of account number 0 5 9 8	
Nonpriority Creditor's Name	When was the debt incurred? 2012-19	
P.O. BOX 30281 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
SALT LAKE CITY UT 84130	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.4		\$3,000.00
CAPITAL ONE BANK	Last 4 digits of account number 4 4 9 7	
Nonpriority Creditor's Name P.O. BOX 30281	When was the debt incurred? 2014-19	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
SALT LAKE CITY UT 84130	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No Yes		
Yes		
4.5		\$3,100.00
CAPITAL ONE BANK (CABELA'S)	Last 4 digits of account number 4 5 3 3	
Nonpriority Creditor's Name	When was the debt incurred? 2013-19	
Number Street #300	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
LINCOLN NE 68521	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		

Debtor 1 GAVIN H. BLACK	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$1,900.00
CMRE FINANCE	Last 4 digits of account number	
Nonpriority Creditor's Name 3075 E. IMPERIAL HWY #200	When was the debt incurred? 2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	Disputed	
BREA CA 92821 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Collecting for - MEDICAL	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.7		\$500.00
FNB OMAHA	Last 4 digits of account number4640	
Nonpriority Creditor's Name P.O. BOX 3412	When was the debt incurred? 2016-19	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	Disputed	
OMAHA NE 68197 City State ZIP Code	Type of NONDRIORITY unccoured eleim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No ☐ Yes		
l les		
4.8		\$1,100.00
JPMCB CHASE CARD	_ Last 4 digits of account number _0_ 5_ 0_ 9_	
Nonpriority Creditor's Name P.O. BOX 15369	When was the debt incurred? 2011-19	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	— ☐ Disputed	
WILMINGTON DE 19850 City State ZIP Code	Type of NONDRIORITY unccoured eleim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No □ Yes		

Debtor 1 GAVIN H. BLACK	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$7,600.00
JPMCB CHASE CARD	Last 4 digits of account number 4 7 5 7	
Nonpriority Creditor's Name	When was the debt incurred? 2014-19	
P.O. BOX 15369 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
WILMINGTON DE 19850	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No Yes		
4.10		\$5,400.00
JPMCB CHASE CARD Nonpriority Creditor's Name	_ Last 4 digits of account number <u>9 2 1 1</u>	
P.O. BOX 15369	When was the debt incurred? 2014-19	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	— ☐ Disputed	
WILMINGTON DE 19850 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? No		
☑ No □ Yes		
4.11		\$8,800.00
NAVIENT	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. BOX 9635	When was the debt incurred? 2005-06	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
WILKES BARRE PA 18773	☐ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ✓ Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	<u> </u>	
Is the claim subject to offset?		
✓ No Yes		

Debtor 1	GAVIN H. BLACK	Case number (if known)	Case number (if known)		
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page			
After listing previous previou	ng any entries on this page, number the page.	m sequentially from the	Total claim		
SYNCB/A Nonpriority C P.O. BOX Number	Creditor's Name	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
Debtor Debtor Debtor At leas Check	State ZIP Code rred the debt? Check one. r 1 only r 2 only r 1 and Debtor 2 only st one of the debtors and another x if this claim is for a community debt m subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card			
✓ No ☐ Yes					

Debtor 1	GAVIN H. BLACK	Case number (if known)	
Part 4:	Add the Amounts for Each Type of Unsecured Claim		

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$9,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$9,000.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$8,800.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. 🖣	\$31,300.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$40,100.00

Fill in this in	formation to ic	lentify your case	et		
Debtor 1	GAVIN	Н.	BLACK		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)) First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for	the: DISTRICT OF	NEVADA		
Case number					
(if known)			Check if this is an amended filing		
0000	1000				
Official Form	1 106G				
Schedule G	: Executory	Contracts an	d Unexpired	Leases	12/
☐ No. Che ✓ Yes. Fil	eck this box and file I in all of the inform	nation below even if th	ourt with your other so ne contracts or lease	chedules. You have nothing else to report on this form. es are listed on Schedule A/B: Property (Official Form 106A/B entract or lease. Then state what each contract or lease).
is for (for ex		le lease, cell phone)	•	ns for this form in the instruction booklet for more examples o	
					f
Person o	r company with w	hom you have the co	ontract or lease	State what the contract or lease is for	f
2.1 <u>TOYOTA</u>	r company with w	•	ontract or lease	State what the contract or lease is for 36 MONTH LEASE	f
	A FINANCIAL SE	•	ontract or lease		f
2.1 TOYOTA Name P.O. BOX	A FINANCIAL SE	•	ontract or lease	36 MONTH LEASE	f
2.1 TOYOTA Name P.O. BOX	X 9786 Street	•	ontract or lease	36 MONTH LEASE	f

Fill	in this ir	nformation to	identify your case	: :				
Debt	or 1	GAVIN	Н.	BLAC		.]		
		First Name	Middle Name	Last Nar	ne			
Debt (Spo		g) First Name	Middle Name	Last Nar	ne	-		
Unite	ed States B	ankruptcy Court f	or the: DISTRICT OF	NEVADA				
	number	, ,			-			
(if kn	own)				Check if this is an amended filing			
						_		
Offic	ial Forr	n 106H						
Sch	edule H	l: Your Cod	lebtors					12/15
neede page. 1. D	d, copy th On the to	e Additional Pag	e, fill it out, and numb nal Pages, write your r	er the entrie	s in the boxes o se number (if kr	the left. Attao own). Answer		o this
_	Yes					• (0	ty property states and term	
ir [Iclude Arizo No. Go Yes. D No Yes. D	ona, California, Id o to line 3. oid your spouse, fo o es	aho, Louisiana, Nevada ormer spouse, or legal o	a, New Mexico	o, Puerto Rico, T	xas, Washingto		
		NN L. BLACK						
	<u>23</u>	318 VALENCIA	former spouse, or legal equ WAY	ıvalent				
	Nu	ımber Street						
	_	PARKS			9434			
	Cit	ty	S	State 2	IP Code			
p c	erson sho reditor on	wn in line 2 agai Schedule D (Off	n as a codebtor only i	f that person edule E/F (O	is a guarantor ficial Form 106	r cosigner. Ma	ouse is filing with you. Lake sure you have listed ale G (Official Form 106G	the
	Column	1: Your codebto	r			Column 2: T	he creditor to whom you	owe the debt
						Check all sch	nedules that apply:	
3.1	Spouse Name	Name Not Ent	ered			□ Schedul	e D, line	
		Chroat				☐ Schedul	e E/F, line 2.1	
	Number	Street					e G, line	
							REVENUE SERVICE	
	City		State	ZID Cod				

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Debtor 1	GAVIN H. BLACK	Case number (if known)			
	Additional Page to List More Codebtors				
(Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt			
		Check all schedules that apply:			
	Spouse Name Not Entered Name	Schedule D, line 2.3			
ī	Number Street	Schedule E/F, line			
-		Schedule G, line WELLS FARGO DEALER SERVICES			
	City State 7IP Code				

Fill in this inforr	nation to identify	y your case:				
Debtor 1	GAVIN	н.	BLACK			
	First Name	Middle Name	Last Name	 Che	ck if this is:	
Debtor 2					An amended filing	
(Spouse, if filing)	First Name	Middle Name	Last Name	ш	7 u. aeaeag	
United States Bank	ruptcy Court for the:	DISTRICT OF NEVADA			A supplement showing postpetition chapter 13 income as of the following date:	
Case number					onapter to moonie as of the following date.	
(if known)					MM / DD / YYYY	
Official Form 10	าลเ					

Official Form 1061

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe	Employment

1.	Fill in your employment information.		Debtor 1		Debtor 2 or non-fil	ing spouse	
	If you have more than one job, attach a separate page with information about	Employment status	☐ Not employed		☐ Employed✓ Not employed		
	additional employers.	Occupation			UNEMPLOYED		
	Include part-time, seasonal, or self-employed work.	Employer's name	IGT				
	Occupation may include	Employer's address	9295 PROTOT	YPE DR.			
	student or homemaker, if it applies.		Number Street		Number Street		
			RENO	NV 89521			
			City	State Zip Code	City	State Zip	Code
		How long employed the	here? 2 MON	гнѕ			

Part 2: **Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse \$7,916.67 \$0.00 List monthly gross wages, salary, and commissions (before all 2. payroll deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. \$0.00 \$0.00 Calculate gross income. Add line 2 + line 3. \$7.916.67 \$0.00

Debt	tor 1 GAVIN H. BLACK	Case number (if known)						
			For Debtor 1			ebtor 2 or iling spouse	9	
	Copy line 4 here	4.	\$7,916.67	_		\$0.00	_	
5.	List all payroll deductions:							
	5a. Tax, Medicare, and Social Security deductions	5a.	\$1,116.24			\$0.00		
	5b. Mandatory contributions for retirement plans	5b.	\$0.00			\$0.00		
	5c. Voluntary contributions for retirement plans	5c.	\$475.00			\$0.00		
	5d. Required repayments of retirement fund loans	5d.	\$0.00			\$0.00		
	5e. Insurance	5e.	\$1,304.46			\$0.00		
	5f. Domestic support obligations	5f.	\$899.99			\$0.00		
	5g. Union dues	5g.	\$0.00			\$0.00		
	5h. Other deductions. Specify:	5h. -	\$0.00			\$0.00		
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$3,795.69			\$0.00		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$4,120.98			\$0.00		
8.	List all other income regularly received:							
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00			\$0.00		
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	8b. Interest and dividends	8b.	\$0.00			\$0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			\$0.00		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
	8d. Unemployment compensation	8d.	\$0.00		9	31,755.00		
	8e. Social Security	8e.	\$0.00			\$0.00		
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
	Specify:	8f.	\$0.00			\$0.00		
	8g. Pension or retirement income	8g.	\$0.00			\$0.00		
	8h. Other monthly income. Specify:	8h.	\$0.00			\$0.00		
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00			1,755.00		
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$4,120.98	+[1,755.00	=	\$5,875.98
11.	 State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 							
	Do not include any amounts already included in lines 2-10 or amounts that	are r	ot available to pay	qxe	enses	s listed in So	hec	dule J.
	Specify:					11.	+	\$0.00
	Add the amount in the last column of line 10 to the amount in line 11. income. Write that amount on the Summary of Your Assets and Liabilities					,		\$5,875.98 Combined
	Do you expect an increase or decrease within the year after you file the							monthly income
	 No. Yes. Explain: THE DEBTOR'S WIFE IS NOT WORKING. SHE RETURNING IN THE NEAR FUTURE. 	E IS I	IAVING MEDICAI	_ 18	SSUE	S AND WI	LL	NOT BE

F	ill in this inforr	mation to iden	tify your case:			Ch	eck if thi	e ie:	
	Debtor 1	GAVIN	Н.	BLAG	CK			s is: nended filing	
		First Name	Middle Name	Last Na			A supp	plement showing er 13 expenses a	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	ame			ng date:	
	United States Bank	ruptcy Court for th	ne: DISTRICT OF	NEVADA			MM / I	DD / YYYY	
	Case number						1411417	3071111	
	(if known)	201							
	fficial Form 10								
	chedule J: Yo	•							12/15
cor nar	rect information. me and case numb	If more space is	needed, attach anoth nswer every question	ner sheet to	ling together, both and this form. On the top				
1.	Is this a joint cas	se?							
2.	No	Debtor 2 live in a bes. Debtor 2 must bendents?] No ☑ Yes. Fill out this ir	J-2, Expense	s for Separate House Dependent's relati Debtor 1 or Debtor	onshi		r 2. Dependent's age	Does dependent live with you?
	Debtor 2.	i aliu –	for each depender	nt		r <u>Z</u>			No No
	Do not state the d	dependents'			SON			_ 12	Yes
	names.				SON			_ 9	- ☑ Yes
									□ No - □ Yes
									□ No
								-	Yes
									□ No - □ Yes
3.	Do your expense expenses of peo yourself and you	ple other than	✓ No ☐ Yes						
Р	art 2: Estim	ate Your Ong	oing Monthly Exp	oenses					
to r		s of a date after t	he bankruptcy is file	-	are using this form as a supplemental Sche			•	
	•		sh government assi on Schedule I: Your	•				Your expens	ses
4.		•	penses for your resi					4.	\$1,750.00
	If not included in		5						
	4a. Real estate t	taxes						4a	
	4b. Property, hor	meowner's, or ren	ter's insurance					4b.	\$15.00
	4c. Home mainte	enance, repair, ar	d upkeep expenses					4c	
		•	ondominium dues					4d.	

	tor 1 GAVIN H. BLACK Case number	(II KIIOWII	1)
		You	r expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$120.00
	6b. Water, sewer, garbage collection	6b.	\$110.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$280.00
	6d. Other. Specify:	6d.	
7.	Food and housekeeping supplies	7.	\$850.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning (See continuation sheet(s) for details)	9.	\$170.00
10.	Personal care products and services	10.	\$90.00
11.	Medical and dental expenses	11.	\$400.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$400.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$225.00
14.	Charitable contributions and religious donations	14.	\$125.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	
	15b. Health insurance	15b.	
	15c. Vehicle insurance	15c.	\$336.00
	15d. Other insurance. Specify:	15d.	Ψοσοίοσ
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 2019 TOYOTA RAV4	17a.	\$528.00
	17b. Car payments for Vehicle 2 2010 MINI COOPER	17b.	\$155.00
	17c. Other. Specify: 2017 TRIUMPH STREET CUP	17c.	\$170.00
	17d. Other. Specify: STUDENT LOAN	17d.	\$134.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you. Specify:	19.	

Debtor 1		GAVIN H. BLACK	Case number (if known)		
20.	Other Sche	r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.			
	20a.	Mortgages on other property	20a		
	20b.	Real estate taxes	20b		
	20c.	Property, homeowner's, or renter's insurance	20c		
	20d.	Maintenance, repair, and upkeep expenses	20d		
	20e.	Homeowner's association or condominium dues	20e.		
21.	Othe	r. Specify: See continuation sheet	21. +	\$965.00	
22.	Calcu	ulate your monthly expenses.			
	22a.	Add lines 4 through 21.	22a	\$6,823.00	
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b		
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$6,823.00	
23.	Calcu	ulate your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$5,875.98	
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$6,823.00	
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	(\$947.02)	
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you	file this form?		
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?					
		No			
	d ,	Yes. Explain here: THE DEBTORS' OLDEST SON HAS MEDICAL CONDITIONS. HE I	HAS A SPECIAL DIET.		

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Debtor 1 GAVIN H. BLACK	Case number (if known)
9. Clothing, laundry, and dry cleaning (details): CLOTHING LAUNDRY	\$150.00 \$20.00
	Total: \$170.00
21. Other. Specify: WIFE'S STUDENT LOANS WIFE'S CREDIT CARD PAYMENTS	\$617.00 \$348.00
	Total: \$965.00

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to

Sign Below								
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
☑ No								
Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
		Declaration, and Signature (Official Politicial).						
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.								
X /s/ GAVIN H. BLACK	X							
GAVIN H. BLACK, Debtor 1	Signature of Debtor 2							
Date <u>07/12/2019</u> MM / DD / YYYY	Date MM / DD / YYYY							

12/15

Fill in this inf	ormation to	identify your case	:		
Debtor 1	GAVIN	Н.	BLACK		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court fo	or the: DISTRICT OF	NEVADA		
Case number				Charle if this is an	
(if known)				Check if this is an amended filing	
	4.07				
Official Form	107				
Statement o	f Financia	I Affairs for Ind	lividuals Filing for	or Bankruptcy	04/19
your name and ca	se number (if k	nown). Answer every	•	orm. On the top of any additional pages, write	
	current marital	etatue?			
Married	current mantai	Status :			
Not marrie	ed				
_	st 3 vears have	you lived anywhere o	other than where you live	e now?	
✓ No	or o years, nave	you iived ally where t	and than where you no	, 110 11	
_	all of the places	you lived in the last 3 y	ears. Do not include whe	re you live now.	
		•	• .	in a community property state or territory?	
, , ,	<i>roperty states ar</i> and Wisconsin.)	nd territories include Ar	izona, California, Idaho, L	ouisiana, Nevada, New Mexico, Puerto Rico, Texas,	

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Deb	Debtor 1 GAVIN H. BLACK		Case nur	Case number (if known)						
P	art 2:	Explain the Sources of Y	our Income							
4.	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.									
	☐ No ☑ Yes. Fill in the details.									
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions				
		ry 1 of the current year until ı filed for bankruptcy:	✓ Wages, commissions, bonuses, tips	\$39,800.00	Wages, commissions, bonuses, tips					
	,		Operating a business		Operating a business					
		calendar year:	✓ Wages, commissions, bonuses, tips	\$90,000.00	Wages, commissions, bonuses, tips					
(Jar	nuary 1 to	December 31,	Operating a business		Operating a business					
For	the cale	ndar year before that:	✓ Wages, commissions, bonuses, tips	\$90,000.00	☐ Wages, commissions, bonuses, tips					
(Jar	nuary 1 to	December 31, 2017)	Operating a business		Operating a business					
5.	Include unempl	a receive any other income durin income regardless of whether that oyment; and other public benefit pa nbling and lottery winnings. If you 1.	income is taxable. Examplayments; pensions; rental ir	les of other income are accome; interest; dividend	ds; money collected from la	awsuits; royalties;				
	List eac	ch source and the gross income fro	m each source separately.	Do not include income	that you listed in line 4.					
	☐ No ✓ Yes	s. Fill in the details.								
			Debtor 1		Debtor 2					
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions				
		ry 1 of the current year until I filed for bankruptcy:	UNEMPLOYMENT	\$2,300.00						
		calendar year: December 31, 2018)	CASHED OUT 401K	\$19,000.00						
		ndar year before that: December 31, 2017								

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Deb	otor 1	GAVIN H. BLACK Case number (if known)
Р	art 3:	List Certain Payments You Made Before You Filed for Bankruptcy
6.	Are eith	er Debtor 1's or Debtor 2's debts primarily consumer debts?
	□ No.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?
		□ No. Go to line 7.
		Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.
		* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.
	✓ Yes	Debtor 1 or Debtor 2 or both have primarily consumer debts.
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?
		☑ No. Go to line 7.
		Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.
7.	Insiders corporat agent, ir	year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; ions of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations child support and alimony.
	☑ No	
	Yes	. List all payments to an insider.
8.		year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that d an insider?
		payments on debts guaranteed or cosigned by an insider.
	✓ No ☐ Yes	. List all payments that benefited an insider.
Р	art 4:	Identify Legal Actions, Repossessions, and Foreclosures
9.	List all s	year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? uch matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody tions, and contract disputes.
	☑ No □ Yes	. Fill in the details.

Deb	tor 1	GAVIN H. BLACK	Case number (if known)
10.	seized,	l year before you filed for bankruptcy, was any of your property repose or levied? Ill that apply and fill in the details below.	sessed, foreclosed, garnished, attached,
	ب	Go to line 11. Fill in the information below.	
11.		90 days before you filed for bankruptcy, did any creditor, including a bast from your accounts or refuse to make a payment because you owed	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	. Fill in the details.	
12.		year before you filed for bankruptcy, was any of your property in the s, a court-appointed receiver, a custodian, or another official?	possession of an assignee for the benefit of
	✓ No ☐ Yes		
Pa	art 5:	List Certain Gifts and Contributions	
13.	Within 2	2 years before you filed for bankruptcy, did you give any gifts with a to	tal value of more than \$600 per person?
	✓ No ☐ Yes	. Fill in the details for each gift.	
14.	Within 2 to any o	2 years before you filed for bankruptcy, did you give any gifts or contricharity?	butions with a total value of more than \$600
	✓ No ☐ Yes	. Fill in the details for each gift or contribution.	
Pá	art 6:	List Certain Losses	
15.		year before you filed for bankruptcy or since you filed for bankruptcy saster, or gambling?	, did you lose anything because of theft, fire,
	✓ No ☐ Yes	. Fill in the details.	

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Deb	tor 1	GAVIN H. BLACK	Case number (if known)
Pa	art 7:	List Certain Payments or Transfers	
16.		1 year before you filed for bankruptcy, did you or anyone else actir e you consulted about seeking bankruptcy or preparing a bankruptc	
	Include	any attorneys, bankruptcy petition preparers, or credit counseling agen	cies for services required for your bankruptcy.
	✓ No ☐ Yes	s. Fill in the details.	
17.		1 year before you filed for bankruptcy, did you or anyone else actir e who promised to help you deal with your creditors or to make pay	• • • • • • • • •
	Do not i	include any payment or transfer that you listed on line 16.	
	✓ No ☐ Yes	s. Fill in the details.	
18.		2 years before you filed for bankruptcy, did you sell, trade, or other ty transferred in the ordinary course of your business or financial a	
		both outright transfers and transfers made as security (such as grantin include gifts and transfers that you have already listed on this statemen	
	✓ No ☐ Yes	s. Fill in the details.	
19.		10 years before you filed for bankruptcy, did you transfer any prope a beneficiary? (These are often called asset-protection devices.)	erty to a self-settled trust or similar device of which
	✓ No ☐ Yes	s. Fill in the details.	
Pa	art 8:	List Certain Financial Accounts, Instruments, Safe D	eposit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts to closed, sold, moved, or transferred?	or instruments held in your name, or for your
		e checking, savings, money market, or other financial accounts; certifica s, pension funds, cooperatives, associations, and other financial instituti	•
	✓ No ☐ Yes	s. Fill in the details.	
21.	•	now have, or did you have within 1 year before you filed for bankr curities, cash, or other valuables?	uptcy, any safe deposit box or other depository
	☑ No □ Yes	s. Fill in the details.	
22.	Have yo	ou stored property in a storage unit or place other than your home	within 1 year before you filed for bankruptcy?
	✓ No ☐ Yes	s. Fill in the details.	

Deb	otor 1	GAVIN H. BLACK	Case number (if known)
P	art 9:	Identify Property You Hold or Control for Someone Els	e
23.	-	hold or control any property that someone else owns? Include any p in trust for someone.	roperty you borrowed from, are storing for,
	✓ No ☐ Yes	. Fill in the details.	
P	art 10:	Give Details About Environmental Information	
For	the purp	ose of Part 10, the following definitions apply:	
ı	hazardoι	nental law means any federal, state, or local statute or regulation con is or toxic substance, wastes, or material into the air, land, soil, surfa statutes or regulations controlling the cleanup of these substances,	ce water, groundwater, or other medium,
		ns any location, facility, or property as defined under any environmer or used to own, operate, or utilize it, including disposal sites.	tal law, whether you now own, operate, or
		us material means anything an environmental law defines as a hazarde, hazardous material, pollutant, contaminant, or similar item.	ous waste, hazardous substance, toxic
Rep	ort all no	otices, releases, and proceedings that you know about, regardless of	when they occurred.
24.	Has any law?	governmental unit notified you that you may be liable or potentially	iable under or in violation of an environmental
25.	Have yo	. Fill in the details. ou notified any governmental unit of any release of hazardous materia . Fill in the details.	1?
26.	Have you	ou been a party in any judicial or administrative proceeding under any	environmental law? Include settlements and
	✓ No ☐ Yes	. Fill in the details.	

Deb	otor 1	GAVIN H. BLACK		Case number (if known)
Р	art 11:	Give Details About Your Busine	ss or Connections to A	Any Business
27.	Within a		id you own a business or ha	ave any of the following connections to any
		A sole proprietor or self-employed in a trace A member of a limited liability company (Li A partner in a partnership An officer, director, or managing executive An owner of at least 5% of the voting or ec	LC) or limited liability partners of a corporation	ship (LLP)
		None of the above applies. Go to Part 12. s. Check all that apply above and fill in the control of the control	details below for each busines	ss.
28.		2 years before you filed for bankruptcy, d ncial institutions, creditors, or other partic	• •	ment to anyone about your business? Include
	□ No □ Yes	s. Fill in the details below.		
Р	art 12:	Sign Below		
tha pro	t answer perty by	s are true and correct. I understand that	making a false statement, co	nts, and I declare under penalty of perjury oncealing property, or obtaining money or \$250,000, or imprisonment for up to 20 years,
		N H. BLACK	X	
		. BLACK, Debtor 1 07/12/2019	Signature of Debtor 2 Date	
Did	l you atta	ch additional pages to Your Statement of	Financial Affairs for Individ	uals Filing for Bankruptcy (Official Form 107)?
_	No Yes			
Did	l you pay	or agree to pay someone who is not an a	attorney to help you fill out b	pankruptcy forms?
☑	No			
	Yes. Na	me of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this info	ormation to i	identify your case	et	
Debtor 1	GAVIN	H.	BLACK	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	or the: DISTRICT OF	NEVADA	
Case number (if known)			_	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Hold Secured Claims Part 1:

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.					
			What do you intend to do with the property that secures a debt?		Did you claim the property as exempt on Schedule C?	
	Creditor's name: Description of property securing debt:	FREEDOMROAD FINANCIAL 2017 TRIUMPH STREET CLUB (approx. 1,800 miles) THE		Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Debtor will continue making payr reaffirming.	ment	No Yes
	Creditor's name: Description of property securing debt:	TOYOTA FINANCIAL SERVICES 36 MONTH LEASE		Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:		No Yes
	Creditor's name: Description of property securing debt:	WELLS FARGO DEALER SERVICES 2010 MINI COOPER (approx. 78,000 miles)		Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:		No Yes

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Debtor 1	GAVIN H. BLACK		Case number (if known)	
Part 2:	List Your Une	xpired Personal Property Leases		
fill in the i	information below. Do	not list real estate leases. Unexpired leas	Executory Contracts and Unexpired Leases (Official Fees are leases that are still in effect; the lease period buttee does not assume it. 11 U.S.C. § 365(p)(2).	• •
Desc	ribe your unexpired p	ersonal property leases	Will this lease be as:	sumed?
	ription of leased 36 N	OTA FINANCIAL SERVICES IONTH LEASE	□ No ☑ Yes	
Part 3:	Sign Below			
		eclare that I have indicated my intention ab oject to an unexpired lease.	out any property of my estate that secures a debt and	d
_	H. BLACK, Debtor 1	X Signature of Debto	<u> </u>	
-	07/12/2019 MM / DD / YYYY	Date MM / DD / Y	YYY	

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA RENO DIVISION

IN RE: GAVIN H. BLACK CASE NO

CHAPTER 7

Signature _____

VERIFICATION OF CREDITOR MATRIX

knowl	•	attached	ist of creditors is true and correct to the best of his/her
KIIOWI	edge.		
Date	7/12/2019	Signature	/s/ GAVIN H. BLACK
Date :		Oignataro	GAVIN H. BLACK

Chapter: 7

BANK OF AMERICA P.O. BOX 982238 EL PASO, TX 79998

TOYOTA FINANCIAL SERVICES P.O. BOX 9786 CEDAR RAPIDS, IA 52409

CAPITAL ONE BANK P.O. BOX 30281 SALT LAKE CITY, UT. 84130

WELLS FARGO DEALER SERVICES P.O. BOX 130000 RALEIGH, NC 27605

CAPITAL ONE BANK (CABELA'S) 4800 NW 1ST STREET #300 LINCOLN, NE. 68521

CMRE FINANCE 3075 E. IMPERIAL HWY #200 BREA, CA. 92821

FNB OMAHA P.O. BOX 3412 OMAHA, NE. 68197

FREEDOMROAD FINANCIAL 10605 DOUBLE "R" BLVD. SUITE 10 RENO, NV 89521

INTERNAL REVENUE SERVICE P.O. BOX 7346 PHILADELPHIA, PA 19101

JPMCB CHASE CARD P.O. BOX 15369 WILMINGTON, DE. 19850

NAVIENT P.O. BOX 9635 WILKES BARRE, PA 18773

SYNCB/AMAZON P.O. BOX 965015 ORLANDO, FL 32896

				07/12/2019 12.40
Fill in this inf	ormation to	identify your case	:	Check one box only as directed in this form and in Form 122A-1Supp:
Debtor 1	GAVIN	H.	BLACK	Torni and in Form 122A-13upp.
	First Name	Middle Name	Last Name	1. There is no presumption of abuse.
Debtor 2				_
(Spouse, if filing)	First Name	Middle Name	Last Name	of abuse applies will be made under Chapter 7
United States Bar	nkruntev Court fo	or the: DISTRICT OF	NEVΔDΔ	Means Test Calculation (Official Form 122A-2)
Office Glates Bai	initiapitoy Court it	or tric. DioTitio1 or	NEVADA	☐ 3. The Means Test does not apply now because
Case number				of qualified military service but it could apply
(if known)				later.
				Check if this is an amended filing
000 - 15	4004.4			
Official Form	122A-1			
Chapter 7 St	tatement c	of Your Current	Monthly Income	12/1
accurate. If more	space is neede	ed, attach a separate s	heet to this form. Include th	r, both are equally responsible for being ne line number to which the additional e number (if known). If you believe that you
• • •	•		•	nsumer debts or because of qualifying

Calculate Your Current Monthly Income Part 1:

122A-1Supp) with this form.

1.

Wha	What is your marital and filing status? Check one only.						
	Not married. Fill out Column A, lines 2-11.						
	Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.						
	Married and your spouse is NOT filing with you. You and your spouse are:						
	Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.						
		Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).					

military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$6,024.96	\$3,638.47
3.	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$0.00	\$0.00
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$0.00	\$0.00

Der	GAVIN H. BLACK			c	ase number (if k	nown)	
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
5.	Net income from operating a busine	ess, profession, o	r farm				
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00	\$0.00				
	Ordinary and necessary operating – expenses	\$0.00	\$0.00	Сору			
	Net monthly income from a business, profession, or farm	\$0.00	\$0.00	here →	\$0.00	\$0.00	
6.	Net income from rental and other re	eal property					
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00	\$0.00				
	Ordinary and necessary operating – expenses	\$0.00	\$0.00	Сору			
	Net monthly income from rental or other real property	\$0.00	\$0.00		\$0.00	\$0.00	
7.	Interest, dividends, and royalties				\$0.00	\$0.00	
8.	Unemployment compensation				\$375.00	\$0.00	
	Do not enter the amount if you conter benefit under the Social Security Act.						
	For you		\$0.	00			
	For your spouse		\$0.0	00			
9.	Pension or retirement income. Do was a benefit under the Social Securi	,	ount received that		\$0.00	\$0.00	
10.	Income from all other sources not I amount. Do not include any benefits or payments received as a victim of a or international or domestic terrorisms separate page and put the total below	received under the war crime, a crime If necessary, list of	Social Security A against humanity	ct ′,			
	Total amounts from separate pages,	-		+		+	
11.	Calculate your total current monthl Add lines 2 through 10 for each colum Then add the total for Column A to th	nn.	3.		\$6,399.96	+ \$3,638.47	= \$10,038.43
	aaa total for committee th	c.ao. column t					Total current monthly income

Deb	tor 1	GAVIN H.	BLACK		Case number (if known)			
P	art 2:	Determ	ine Whether the Means	Test Applies to You				
12.	Calc	late your cur	rent monthly income for the	year. Follow these steps:				
	12a.	Copy your tot	tal current monthly income from	m line 11	Copy line 11 here → 12a. \$10,038.43			
		Multiply by 12	2 (the number of months in a y	/ear).	X 12			
	12b.	The result is	your annual income for this pa	art of the form.	12b. \$120,461.16			
13.	Calc	late the medi	an family income that applie	es to you. Follow these steps:				
	Fill in	the state in wh	hich you live.	Nevada				
	Fill in	the number of	f people in your household.	4				
	Fill in	the median fa	mily income for your state and	d size of household	13. \$84,997.00			
				ts, go online using the link spec railable at the bankruptcy clerk's				
14.	How	do the lines c	ompare?					
	14a.	Line 12b	•	3. On the top of page 1, check	box 1, There is no presumption of abuse.			
	14b.	<u> </u>	o is more than line 13. On the art 3 and fill out Form 122A-2.		e presumption of abuse is determined by Form 122A-2.			
P	art 3:	Sign Be	elow					
	Ву	igning here, I	declare under penalty of perju	ry that the information on this s	tatement and in any attachments is true and correct.			
		o/ CAVIN U	DI ACK	v				
		SAVIN H. BAVIN H. BLA		X Sign	nature of Debtor 2			
		Date 7/12/20		Date				
	lf y		O / YYYY e 14a, do NOT fill out or file Fo	orm 122A-2.	MM / DD / YYYY			

If you checked line 14b, fill out Form 122A-2 and file it with this form.

	formation to	identify your case	:		Check the appropriate box as directed in lines 40 or 42:
Debtor 1	GAVIN First Name	H.	BLACK Last Nam		
Dalatan	First Name	Middle Name	Last Nam	'	According to the calculation required by this Statement:
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Nam	 e	✓ 1. There is no presumption of abuse.
United States B	ankruptcy Court fo	or the: DISTRICT OF	NEVADA		E There is the presumption of abuse.
Case number	. ,				2. There is a presumption of abuse.
(if known)					Check if this is an amended filing
Official Forn	n 122A-2				
		Calculation			04/
•					
o fill out this fo 22A-1).	rm, you will need	your completed copy	y of Chapter	Statement of Your C	Current Monthly Income (Official Form
as complete :	and accurate as i	nossible If two marri	ed neonle ar	filing together, both	are equally responsible for being
•		-			number to which the additional
formation appl	ies. On the top of	of any additional page	s, write your	name and case numb	er (if known).
Part 1: De	etermine Your	r Adjusted Income)		
Copy your t	otal current mon	thly income	Copy lin	e 11 from Official For	m 122A-1 here
Did you fill o	out Column B in	Part 1 of Form 122A-1	?		
☐ No. Fill	I in \$0 for the total	l on line 3.			
✓ Yes. Is	your spouse filing	g with you?			
— ☑ No	o. Go to line 3.				
☐ Ye	es. Fill in \$0 for th	e total on line 3.			
	•	income by subtractin	• .	•	e not used to pay for
		122A-1, was any amoւ f you or your dependen		ne you reported for you	ur spouse NOT regularly used
☑ No. Fill	I in \$0 for the total	I on line 3.			
_	ill in the information	on below:			
Yes. Fi		which the income was	s used		_
	ach purpose for			Fill in the amount your are subtracting from	
State e	imple, the income to support people	other than you or your		your spouse's incor	me
State e For exa debt or	imple, the income to support people			•	me _
State e For exa debt or	imple, the income to support people			•	me
State e For exa debt or	imple, the income to support people			•	me - -

4. Adjust your current monthly income. Subtract the total on line 3 from line 1.

\$10,038.43

Debtor 1	GAVIN H. BLACK	Case number (if known)
	_	

Part 2: **Calculate Your Deductions from Your Income**

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$1,786.00

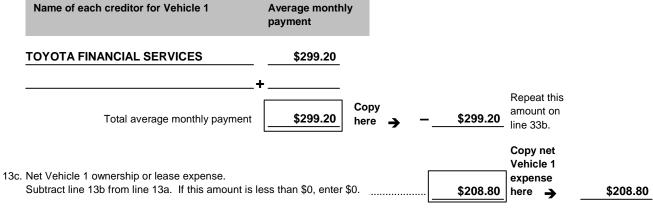
Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories-people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age					
7a. Out-of-pocket health care allowance per person	\$55.00				
7b. Number of people who are under 65	x4				
7c. Subtotal. Multiply line 7a by line 7b.	\$220.00	Copy here →	\$220.00		
People who are 65 years of age or older					
7d. Out-of-pocket health care allowance per person	\$114.00				
7e. Number of people who are 65 or older	х				
7f. Subtotal. Multiply line 7d by line 7e.	\$0.00	Copy here	\$0.00		
				Copy total	
7g. Total. Add lines 7c and 7f		<u></u>	\$220.00	here → 7g.	

\$220.00

Debto	or 1	GAVIN H. BLACK	Case number (if known)	
Loc	al Sta	andards You must use the IRS Local Sta	andards to answer the questions in lines 8-15.	
		n information from the IRS, the U.S. Trustee Pr ruptcy purposes into two parts:	ogram has divided the IRS Local Standard for housing	
		ng and utilities Insurance and operating exp ng and utilities Mortgage or rent expenses	penses	
То	answ	er the questions in lines 8-9, use the U.S. Trus	tee Program chart.	
		e chart, go online using the link specified in the s at the bankruptcy clerk's office.	eparate instructions for this form. This chart may also be	
8.		sing and utilities Insurance and operating ex the dollar amount listed for your county for insura	xpenses: Using the number of people you entered in line 5, ance and operating expenses.	\$648.00
9.	Hou	sing and utilities Mortgage or rent expenses	:	
	9a.	Using the number of people you entered in line 5 for your county for mortgage or rent expenses.	5, fill in the dollar amount listed \$1,510.00	
	9b.	Total average monthly payment for all mortgages your home.	s and other debts secured by	
		To calculate the total average monthly payment, contractually due to each secured creditor in the bankruptcy. Then divide by 60.		
		Name of the creditor	Average monthly payment	
			-	
		Total average monthly new month	Copy Repeat this amount on	
		Total average monthly payment	\$0.00 here - \$0.00 line 33a.	
	9c.	Net mortgage or rent expense.	Ca	
		Subtract line 9b (total average monthly payment) rent expense). If this amount is less than \$0, en	, a s a projection of the same	\$1,510.00
10.	-	u claim that the U.S. Trustee Program's division affects the calculation of your monthly expens	on of the IRS Local Standard for housing is incorrect ses, fill in any additional amount you claim.	\$240.00
	Expl why:	- · · · · ·		_ _
11.	Loca	al transportation expenses: Check the number	of vehicles for which you claim an ownership or operating expense).
		0. Go to line 14.		
		1. Go to line 12.		
	_	2 or more. Go to line 12.		
12.			andards and the number of vehicles for which you claim the oply for your Census region or metropolitan statistical area.	\$736.00

Debto	or 1	GAVI	N H. BLACK	Ca	ase number (if known)			
13.	expen	se for e	each vehicle below. You may not	the IRS Local Standards, calculate the claim the expense if you do not make expense for more than two vehicles.	•			
	Vehicle 1 Describe Vehicle 1: 36 MONTH LEASE		NTH LEASE					
			nip or leasing costs using IRS Loc	al Standard	\$508.00			
	Do not include costs for leased vehicles.							
	a	amounts	late the average monthly paymer that are contractually due to eac I filed for bankruptcy. Then divide	n secured creditor in the 60 months				



Vehicle 2 Describe Vehicle 2: 2010 MINI COOPER (approx. 78,000 miles)

- \$508.00 13d. Ownership or leasing costs using IRS Local Standard.
- 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment		
WELLS FARGO DEALER SERVICES	\$103.33		
Total average monthly payment	#400 00 l	opy ere → - \$103.33	Repeat this amount on line 33c.
13f. Net Vehicle 2 ownership or lease expense. Subtract line 13e from 13d. If this amount is less	than \$0, enter \$0	\$404.67	Copy net Vehicle 2 expense here

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation.

\$404.67

Debto	r 1 GAVIN H. BLACK	Case number (if known)	
15.	also deduct a public transpor	ation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may reation expense, you may fill in what you believe is the appropriate expense, but you may cocal Standard for Public Transportation.	\$0.00
Othe	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses following IRS categories.	or the
16.	self-employment taxes, social your pay for these taxes. How	ount that you will actually owe for federal, state and local taxes, such as income taxes, I security taxes, and Medicare taxes. You may include the monthly amount withheld from wever, if you expect to receive a tax refund, you must divide the expected refund by 12 in the total monthly amount that is withheld to pay for taxes.	\$1,485.78
	Do not include real estate, sa	les, or use taxes.	
17.	Involuntary deductions: Thunion dues, and uniform cost	e total monthly payroll deductions that your job requires, such as retirement contributions, s.	\$0.00
	Do not include amounts that	are not required by your job, such as voluntary 401(k) contributions or payroll savings.	
18.	filing together, include payme	onthly premiums that you pay for your own term life insurance. If two married people are nts that you make for your spouse's term life insurance. Do not include premiums for life s, or a non-filing spouse's life insurance, or for any form of life insurance other than	\$0.00
19.	Court-ordered payments: agency, such as spousal or c	The total monthly amount that you pay as required by the order of a court or administrative hild support payments.	\$900.00
	Do not include payments on p	past due obligations for spousal or child support. You will list these obligations in line 35.	
20.	as a condition for your job		\$0.00
	for your physically or men	tally challenged dependent child if no public education is available for similar services.	
21.		amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. any elementary or secondary school education.	\$0.00
22.	is required for the health and health savings account. Inclu	nses, excluding insurance costs: The monthly amount that you pay for health care that welfare of you or your dependents and that is not reimbursed by insurance or paid by a ude only the amount that is more than the total entered in line 7. e or health savings accounts should be listed only in line 25.	\$145.00
23.	for you and your dependents,	ephone services: The total monthly amount that you pay for telecommunication services such as pagers, call waiting, caller identification, special long distance, or business cell necessary for your health and welfare or that of your dependents or for the production led by your employer.	\$65.00
	. ,	pasic home telephone, internet and cell phone service. Do not include self-employment orted on line 5 of Official Form 122A-1, or any amount you previously deducted.	
24.	Add all of the expenses allowed Add lines 6 through 23.	wed under the IRS expense allowances.	\$8,349.25

Debto	or 1 GAVII	GAVIN H. BLACK Case number (if known)						
Add	litional Expen	se Deductions			allowed by the Mease allowances listed			
25.	insurance, dis	•	•	•	•	e monthly expenses for health sary for yourself, your		
	Health insura	nce		\$1,304.46				
	Disability insu	ırance		\$0.00				
	Health saving	s account	+	\$0.00				
	Total			\$1,304.46	Copy total here	→	<u>\$</u>	1,304.46
	Do you actua	lly spend this total a	mount?					
	☐ No. Hov	v much do you actua	ally spend?					
	✓ Yes							
26.	will continue to member of yo	o pay for the reasor	nable and necessa mber of your imme	ary care and suppediate family who	oort of an elderly, ch o is unable to pay fo	monthly expenses that you nronically ill, or disabled or such expenses. These S.C. § 529A(b).		\$0.00
27.	Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.						\$0.00	
	By law, the co	ourt must keep the n	ature of these exp	enses confident	ial.			
28.	Additional ho	ome energy costs.	Your home energy	y costs are includ	ded in your insurand	ce and operating expenses		
	•	that you have home	• .		he home energy co	ests included in expenses on		
	_	e your case trustee ed is reasonable an		your actual expe	nses, and you mus	t show that the additional		
29.	\$170.83* per		or your dependent			y expenses (not more than rears old to attend a private or		\$0.00
		e your case trustee asonable and neces				t explain why the amount		
	* Subject to a	djustment on 4/01/2	2, and every 3 year	ars after that for	cases begun on or	after the date of adjustment.		
30.	higher than th	_	nd clothing allowar	nces in the IRS N	lational Standards.	od and clothing expenses are That amount cannot be more		
		rt showing the maxir or this form. This ch			•	ecified in the separate ice.		
	You must sho	w that the additiona	l amount claimed	is reasonable an	d necessary.			
31.		haritable contribut				in the form of cash or financia	· +	\$125.00

Debto	or 1	GAVIN H. BLACK					Case n	number (if known)		
32.		all of the additional extract the same and t	xpense dedu	ctions.						\$1,429.46
Dec	luctior	s for Debt Payment								
33.		ebts that are secured , and other secured				, including	g home i	mortgages, vehi	cle	
		lculate the total average months after you file				are contrac	ctually du	ue to each secure	d creditor in	
								verage monthly ayment		
		Mortgages on your	home:							
	33a.	Copy line 9b here					→	\$0.00		
		Loans on your first	two vehicles	:						
	33b.	Copy line 13b here					→	\$299.20		
	33c.	Copy line 13e here					→	\$103.33		
	33d.	List other secured de	bts:							
		e of each creditor for secured debt		Identify property secures the debt	that	Does pa include insurance	taxes or			
	FRE	EDOMROAD FINAN	ICIAL	2017 TRIUMPH	STREET	CLL 🗹	No Yes	\$170.00		
							No			
							Yes			
						🛚	No +	-		
							Yes		Copy total	
	33e.	Total average month	ly payment. A	Add lines 33a throug	gh 33d			\$572.53	here →	\$572.53
34.		ny debts that you list				esidence, a	a vehicle	e, or other prope	rty	
	ш	payments listed	in line 33, to	ust pay to a creditor keep possession of le by 60 and fill in th	your prop	erty (called				
Nan	ne of t	he creditor	Identify pro		Total cu amount			Monthly cure amount		
						÷	60 =			
			_			- 	60 =			
							60 = 4			
							Total	\$0.00	Copy total	\$0.00

Debto	or 1	GA	VIN H. BLACK	Case nu	mber (if known) _		
35.	alimo	ony	we any priority claims such as a priority tax, child support, or that are past due as of the filing date of your bankruptcy case? § 507.				
	ш.	No. Yes.	Go to line 36. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.				
			Total amount of all past-due priority claims		\$9,000.00	÷ 60 =	\$150.00
36.	For m	nore i	ligible to file a case under Chapter 13? 11 U.S.C. § 109(e). nformation, go online using the link for Bankruptcy Basics specified in is for this form. Bankruptcy Basics may also be available at the bankruptcy.				
	П	No.	Go to line 37.				
	$\overline{\square}$	Yes.	Fill in the following information.				
			Projected monthly plan payment if you were filing under Chapter 13		\$200.00		
			Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alab and North Carolina) or by the Executive Office for United States Trus (for all other districts).		x 10 %	, 0	
			To find a list of district multipliers that includes your district, go online the link specified in the separate instructions for this form. This list n also be available at the bankruptcy clerk's office.	-			
			Average monthly administrative expense if you were filing under Cha	pter 13	\$20.00	Copy total here	\$20.00
37.			the deductions for debt payment. 33e through 36.				\$742.53
Tota	al Ded	uctio	ons from Income				
38.	Add	all of	the allowed deductions.				
			24, All of the expenses allowed under IRS sallowances				
	Сору	line :	32, All of the additional expense deductions \$1,429.46				
	Сору	line	37, All of the deductions for debt payment+ \$742.53				
	Total	dedu		opy total	here 👈		\$10,521.24
Par	rt 3:	D	etermine Whether There Is a Presumption of Abuse				
39.	Calc	ulate	monthly disposable income for 60 months				
	39a.		by line 4, adjusted current monthly income				
	39b.	Cop	oy line 38, <i>Total deductions</i> – \$10,521.24				
	39c.		onthly disposable income. 11 U.S.C. § 707(b)(2). (\$482.81) her otract line 39b from line 39a.		(\$482.81)		
		For	the next 60 months (5 years)		x 60		
	39d.	Tot	al. Multiply line 39c by 60	39d.	(\$28,968.60)	Copy here	(\$28,968.60)

Debto	r 1	GA	VIN H. BLACK	Case number (if known)						
40.	Find out w		hether there is a presumption of abuse. Check the box that applies:							
		The line 39d is less than \$8,175*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5.								
			ine 39d is more than \$13,650*. On the top of page 1 of this form, che nay fill out Part 4 if you claim special circumstances. Then go to Part 5	· · · · · · · · · · · · · · · · · · ·						
		The I	ine 39d is at least \$8,175*, but not more than \$13,650*. Go to line 41							
		* Sub	ject to adjustment on 4/01/22, and every 3 years after that for cases file	ed on or after the date of adjustment.						
41.	41a.	A S	in the amount of your total nonpriority unsecured debt. If you filled turnmary of Your Assets and Liabilities and Certain Statistical Information icial Form 106Sum), you may refer to line 3b on that form.	on Schedules						
				x .25						
	41b.		6 of your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A) tiply line 41a by 0.25.	(i)(i)(l).						
42.	is e	nough	e whether the income you have left over after subtracting all allowed to pay 25% of your unsecured, nonpriority debt. box that applies:	ed deductions						
		Line 39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>There is no presumption of abuse.</i> Go to Part 5.								
		Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2, <i>There is a presumption of abuse.</i> You may fill out Part 4 if you claim special circumstances. Then go to Part 5.								
Par	t 4:	G	ive Details About Special Circumstances							
43.	-		ive any special circumstances that justify additional expenses or a re is no reasonable alternative? 11 U.S.C. \S 707(b)(2)(B).	djustments of current monthly income for						
	$\overline{\mathbf{A}}$	No.	Go to Part 5.							
	Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25.									
	You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments.									
			Give a detailed explanation of the special circumstances	Average monthly expense or income adjustment						

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Debtor 1	GAVIN H. BLACK	Case number (if known)				
Part 5:	Sign Below					
By si	igning here, I declare under penalty of perjury th	at the information on this statement and in any attachments is true and correct.				
χ <u>/</u> s	s/ GAVIN H. BLACK	x				
G	SAVIN H. BLACK, Debtor 1	Signature of Debtor 2				
D	ate 7/12/2019	Date				
	MM / DD / YYYY	MM / DD / YYYY				

Current Monthly Income Calculation Details

In re: GAVIN H. BLACK Case Number: Chapter: 7

2. Gross wages, salary, tips, bonuses, overtime and commissions.

Debtor or Spouse's Income	Description (if available)								
	6	5	4	3	2	Last	Avg.		
	Months	Months	Months	Months	Months	Month	Per		
	Ago	Ago	Ago	Ago	Ago		Month		
Debtor	GROSS INCOME FROM EMPLOYMENT-SPIN GAMES								
	\$7,096.16	\$7,096.16	\$9,142.96	\$0.00	\$0.00	\$0.00	\$3,889.21		
Debtor	GROSS INCOME FROM EMPLOYMENT-IGT								
	\$0.00	\$0.00	\$0.00	\$0.00	\$5,493.80	\$7,320.72	\$2,135.75		
Spouse	GROSS INCOME FROM EMPLOYMENT								
	\$3,307.70	\$3,307.70	\$4,961.55	\$3,307.70	\$3,307.70	\$3,638.47	\$3,638.47		

8. Unemployment compensation.

Debtor or Spouse's Income	Description (if available)							
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month	
<u>Debtor</u>	UINEMPLOY	MENT COM \$0.00		\$2.250.00	\$0.00	\$0.00	\$375.00	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form-sometimes called the Means Test--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the Means Test, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankrur

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.}{}$

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.